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AMENDMENT TRANSMITTAL LETTER			DOCKET NUMBER: P-TB 4568	
SERIAL NO: 09/765,693	FILING DATE: January 19, 2001	EXAMINER: M. Garcia	GROUP ART UNIT: 1627	
INVENTION: MULTI-PARTITE LIGANDS AND METHODS OF IDENTIFYING AND USING SAME				

TO COMMISSIONER FOR PATENTS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C., 20231 on May 15, 2001.

By: Deborah L. Cadena
Deborah L. Cadena, Reg. No. 44,048

May 15, 2001
Date of Signature

Transmitted herewith is a Response to the Notice of Non-Compliant Amendment (37 C.F.R. §1.121) in the above-identified application.

- ☒ Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.
- ☒ Appendix A.
- ☐ Petition for Extension of Time is enclosed (in duplicate).
- ☒ No additional claims fee is required.
- ☐ An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	5	-	20	-	0	x	\$9	\$18	=	\$0.00	\$
INDEPENDENT CLAIMS	1	-	3	-	0	x	\$40	\$80	=	\$0.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/> YES		<input checked="" type="checkbox"/> NO		\$135	\$270	=	\$0.00	\$
							TOTAL ADDITIONAL FEE			\$0.00	\$

- * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- ** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- *** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventor: Daniel S. Sem
Serial No.: 09/765,693
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— Please charge my Deposit Account No. 03-0370 the amount of \$ _____. A duplicate copy of this sheet is enclosed.

— A check in the amount of \$ _____ is enclosed, \$ _____ of which covers the fee for a _____-month extension of time.

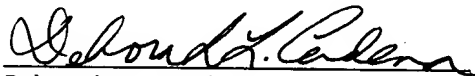
X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-0370. A duplicate copy of this sheet is enclosed.

X Any additional filing fees required under 37 C.F.R. 1.16.

X Any patent application processing fees under 37 C.F.R. 1.17.

X The Commissioner is hereby authorized to charge to Deposit Account No. 03-0370 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



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